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ABSTRACT

Criteria are established for a definition of "clinical supervision" and the effectiveness of such supervisory programs in a student teaching context are considered. Two differing genres of clinical supervision are constructed: "supervision by pattern analysis" is contrasted with "supervision by performance objectives." An outline of procedural structure for each of the methods is given, and the critical role of the supervisor in these and other compromise classroom observation techniques is discussed. (LH)

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TWO APPROACHES TO CLINICAL SUPERVISION

Presented by
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Introduction

Clinical supervision is a concept that has been receiving increased attention by educators during the past five to ten years. Some indications of this are that two major books have been written which bear the title, Clinical Supervision; [1,2] a number of workshops on clinical supervision have been offered by professional organizations; and a variety of articles, as well as an entire issue of a professional journal, [3] have been devoted to this topic.

In spite of the fact that clinical supervision has been written about, discussed, taught, and sometimes attempted, it remains, according to Robert J. Krajewski, "...a latent force for the improvement of instruction," and "... yet to be fully born to the world of public education."[4:1] It is also my own conclusion that clinical supervision is still an emerging concept and practice.

As an emerging concept, clinical supervision will continue to be clarified and refined. My purpose in this presentation is to further the clarification and refinement processes by providing an analysis that (1) sharpens the definition of clinical supervision and (2) distinguishes between two approaches to this type of supervisory practice. The ideas to be presented have arisen as a result of conceptual inquiry which I have conducted during the past several years. It is my assumption that these ideas can serve as a foundation for building and promoting programs of clinical supervision relevant to both pre-service and in-service education.

Concept of Clinical Supervision

Clinical supervision was conceived by Morris Cogan and his associates at Harvard University more than fifteen years ago. Programs of clinical

supervision were established in their Master of Arts in Teaching Program as they became convinced of previous supervisory failures. Cogan states that, "Supervisors began to team up with students working more intensively for longer periods of time in more sustained sequences of planning, observation, and analysis. The post-teaching conferences became a careful study of observation data--a quest for the meaning of what happened in the classroom." (1:6,7)

The essential characteristics of Cogan's concept of clinical supervision, based on my analysis of his publications, include the following:

(1) Has as its goal the improvement of student learning via the improvement of classroom teaching performance

(2) Maintains a focus on in-class instructional events

(3) Is carried on by a supervisor and teacher in face-to-face relationships

(4) Includes a sequence of a pre-observation conference followed by an observation of teaching and then by a post-observation conference

(5) Is cyclical in nature over an extended period of time

(6) Involves a collegial relationship between the supervision and teacher

(7) Entails the analysis of patterns of classroom behavior.

It is my judgment that if a supervisory practice lacks any one of these characteristics, it would not be considered clinical supervision from Cogan's point of view.

Robert Goldhammer, who built on the work of Morris Cogan, characterizes clinical supervision in much the same way as Cogan by specifying such defining properties of this practice as: "close observation," "detailed observational data," "face-to-face interaction between the supervisor and teacher," "intensity of focus that binds the supervisor and teacher to-

gether in an intimate professional relationship," and "pattern analysis."

While Cogan heavily emphasizes the need for collegial relationships in his conception of clinical supervision, Goldhammer clearly sees pattern analysis as an essential element in his picture of clinical supervision. He believes that ideographic anaylsis of behavioral data and a tendency to develop categories of analysis after teaching has been observed, rather than before, are basic to any notion of clinical supervision. Thus, for him, if a practice is to be called clinical supervision, it must involve the analysis of patterns of classroom behavior after data have been collected and analyzed.

I wholeheartedly agree with Cogan and Goldhammer that we need to give increased attention to the type of in-class supervision which they present. I am also in agreement with them that "clinical supervision," despite the connotations of pathology, clinical medicine, and clinical psychology which it unfortunately carries, is a useful term in denoting systematic supervision of in-class teaching. Further, I believe, as they do, that clinical supervision should refer to a type of supervision that includes cycles of a pre-observation conference followed by an observation of teaching and then by a post-ovservation conference for the purpose of helping teachers improve their teaching performance. I do <u>not</u>, however, believe that it is necessary nor useful to conceive of clinical supervision as requiring collegial relationships or as a process which necessarily involves the analysis of patterns of teaching after detailed, concrete data have been collected.

Regarding the first of these two disagreements, clinical supervision, from my perspective, ought not to be thought of as always involving collegial relationships if by this term is meant "mutual support," "working together as equals," "not involving ascendent roles," and "shared leadership." The

reason is that in-service teachers, as well as student teachers, vary in their levels of maturity. Thus, some teachers who are quite self-actualized may easily participate in and benefit from a collegial approach to supervision, while others, who are not very able to successfully interact with their environment, may survive and eventually grow only if they receive supervision that is highly directive, task oriented, and somewhat limited as to the amount of interpersonal warmth, trust, and empathy which are included.

Establishing a collegial relationship with a teacher may be the ultimate goal of a clinical supervisor; however, adaptive leadership requires that this type of relationship not always be in operation. Clinical supervision, from my standpoint, can thus denote a systematic supervisory practice of in-class teaching which is sometimes supervisor-directed and one-way, and other times more teacher-directed and collegial in nature.

My second disagreement with Cogan's and Goldhammer's definition of clinical supervision was that I do not think it is necessary nor useful to conceive of clinical supervision as requiring pattern analysis. It seems to me that there are some limitations to the pattern analysis process, and in addition, there is an alternative to this process which can also fruitfully be considered as a type of clinical supervision.

One limitation of the pattern analysis process is that it is extremely difficult to obtain a complete record of events. So much goes on very quickly in the classroom. A related problem is knowing when an account becomes complete.

A second limitation is that while the pattern analysis process requires a supervisor to come to an observational situation relatively free from past knowledge and values so that an objective, factual record can be made of classroom happenings, it is extremely difficult and not always useful to do so. It is difficult for me to see how one can make any observation of

teaching apart from drawing upon some set of previously-developed concepts and beliefs about teaching. Furthermore, I can think of certain supervisory contexts in which it would be better consciously to rely on a systematic body of knowledge about teaching to guide observation of teaching and the data collection process.

One type of situation in which it does seem fruitful for a supervisor to guide observation and data collection by drawing upon previously established knowledge about teaching is that in which evidence about cause-effect relationships between teaching and learning warrant the establishment of teaching performance goals. (These are in addition to student learning goals.) A clinical supervisor may help a teacher in this context by collecting data which is useful in determining the degree to which a teaching performance goal was actually achieved. Knowledge about the selected teaching performance goal would necessarily guide the development or selection of a particular data collection instrument as well as the actual process of gathering the data. Thus, in this type of situation, categories of knowledge would be systematically brought to an observational situation rather than evolving from an analysis of data which have been recorded while observing an event.

One might soundly argue that we do not have a great amount of scientifically tested cause-effect knowledge about teaching that is universally applicable. None-the-less, it is possible, in my judgment to have knowledge about relatively unique instructional situations, i.e., knowledge about cause-effect relationships which appear to hold in a <u>particular</u> classroom for a <u>particular</u> teacher and class. We can draw upon this situational knowledge as well as on some general knowledge about teaching, which we do have, to guide us in establishing teaching performance goals and in carrying out a supervisory program centering around them.

Another type of situation in which it seems useful for a supervisor to guide observation and data collection by drawing upon previously established knowledge about teaching is that in which a particular teaching performance is considered to be a logical part of a selected teaching approach which is valued. For example, of one values an inquiry apporach for students, asking open questions may represent a logically-related performance goal. Likewise, if one wishes students to learn to settle interpersonal disputes, then it seems reasonable to establish as a performance goal that the teacher permits students to get involved in settling their own interpersonal disputes. Knowledge of performance goals related logically to some valued instructional approach or to desired student response may guide the development or selection of a particular data collection instrument as well as the actual process of obtaining data relevant to assessing the degree to which a performance goal has been achieved.

These two situations suggest an alternative type of supervisory process, one which centers around specified teaching performance goals and their achievement rather than around identified patterns of teacher or student behavior. This alternative may be called Supervision by Performance Objectives, while the pattern analysis approach may be termed Supervision by Pattern Analysis. It is my contention that the label "clinical supervision" is appropriately applied to both of these approaches. Broadening the concept of clinical supervision to include Supervision by Performance Objectives and Supervision by Pattern Analysis seems reasonable at a time in which there is a need to be general and open enough to make room for trying out and evaluating a number of supervisory options.

The concept of clinical supervision which I wish to propose as useful includes the following essential characteristics:

(1) Has as its goal the improvment of student learning via the improvement of classroom teaching performance;

(2) Maintains a focus on in-class instructional events;

(3) Is carried on by a supervisor and teacher(s) in face-to-face relationships;

(4) includes a sequence of a pre-observation conference followed by an observation of teaching and then by a post-observation conference; and

(5) Is cyclical in nature over an extended period of time.

Clinical supervision defined in this manner can be carried out within a variety of supervisor-teacher relationships and can include the alternative approaches of (1) Supervision by Pattern Analysis, (2) Supervision by Performance Objectives, or (3) some combination of these two.

Two Approaches to Clinical Supervision: Supervision by Pattern Analysis and Supervision by Performance Objectives

My purpose in the remainder of this presentation is to distinguish between Supervision by Pattern Analysis and Supervision by Performance Objectives. I will do this by showing the supervisory steps involved in each approach, highlighting the assumptions on which each approach is based, and identifying various contexts in which each approach is useful. Finally, I will suggest some further research and development efforts which are needed in order to refine and evaluate these two forms of clinical supervision.

The difference between Supervision by Pattern Analysis and Supervision by Performance Objectives can be conveyed by presenting the basic steps in each approach. I have drawn upon the work of Cogan, Goldhammer, Hilda Taba, and ideas from Management by Objectives in developing these steps.

Supervision by Pattern Analysis	Supervision by Performance Objectives
1. Establish an interpersonal relationship with the teacher	1. Establish an interpersonal relationship with the teacher
2. Agree upon the general process involved in Supervision by Pattern Analysis	2. Agree upon the general process involved in Supervision by Performance Objectives
3. Become familiar with the lesson to be taught	3. Become familiar with the lesson to be taught
4. Observe and collect data about realities of the lesson	4. Identify critical instructional goals relevant to the approach employed in the lesson
5. Edit collected data into manageable form	5. State instructional goals in terms of anticipated instructional behaviors
6. Identify behavioral patterns in the data	6. Decide what data should be collected during the observation and determine procedures for obtaining it
7. Group similar patterns and identify the generalized patterns on which the groupings are based	7. Observe and collect the data
8. Identify possible cause-effect relationships within the data	8. Analyze and interpret the data
9. Determine salient and treatable patterns	9. Evaluate the instructional performance in light of stated performance goals
10. Evaluate the salient and treatable patterns	

The basic steps of the two appraches are similar in several ways. First, by glancing at the list you will note that the first three steps in each sequence are the same. Second, both sequences of steps end with an evaluation of instructional performance. Third, each sequence includes some type of pre-conference, observation of teaching, and post-conference.

The essence of each of the above approaches involves important differences. Supervision by Pattern Analysis essentially involves a supervisor coming into a classroom, observing and recording in detail what goes on in the whole lesson or some part or facet of it, analyzing the data for recurring teacher and student behaviors (patterns), making an assessment about the effectiveness of these patterns and helping the teacher become aware of patterns which were effective and should be repeated and those which were ineffective and should be modified. And thus the cycle goes on.

Supervision by Performance Objectives basically involves a supervisor observing classroom instruction for the purpose of determining the degree to which some specified teaching performance goal was achieved. Performance goals which are judged to have been met may be set aside in future sequences of clinical supervision. Those which are judged as significantly unmet will most likely become the object of attention in a future round of clinical supervision.

A number of assumptions underlying Supervision by Pattern Analysis and Supervision by Performance Objectives help to distinguish them as two "ideal types" on opposite ends of a continuum. Since each cluster of assumptions is to be viewed as an ideal type, there may not be any actual programs of clinical supervision which are built solely around all of the assumptions in one or the other of the two sets.

Supervision by Pattern Analysis and Supervision by Performance Objectives differ in the following bi-polar set of assumptions:

Assumptions

Supervision by Pattern Analysis	Supervision by Performance Objectives
1. No prepared observational guides should be used	1. Prepared observational guides should be used in collecting data
2. Focus should be on teacher and student performance	2. Focus should be on teacher performance
3. Evaluation should be made in light of effects on student learning performance	3. Evaluation should be made in light of teaching performance goals
4. Emphasis should be on the total instructional context	4. Emphasis should be on selected facets of instruction
5. No emphasis should be placed on supervisor's knowing specific teacher performance goals prior to observation	5. Emphasis should be placed on supervisor's knowing behavioralized teacher performance goals prior to observation
6. Effective teaching performance should be situationally determined	6. Effective teaching performance should be universally determined

The first assumption has to do with the use of observation schedules. On the one hand, those who support Supervision by Pattern Analysis assume that observational schedules should not be used, while those who favor Supervision by Performance Objectives assume that they should. The reason offered for not using observation schedules, as in the case of Supervision by Pattern Analysis, is a belief that supervisors can more accurately and completely record specifics of what occurred in the lesson and more creatively come to conclusions about what happened and why. The reason for using observation schedules, as in the case of Supervision by Performance Objectives, is a belief that they represent a logical and efficient means for collecting data relevant to evaluating teaching performance in light of teaching performance goals.

As the second and third assumptions indicate, in Supervision by Pattern Analysis, data should be collected on student performance as well as teacher performance since this approach maintains that the results of

teacher performance can be measured to a significant degree by student performance. Within Supervision by Performance Objectives, data should be collected only on teacher performance since this approach maintains that appropriate student learning and morale will result if desired teacher performance is evidenced.

Assumption number four conveys that under Supervision by Pattern Analysis the focus should be global in nature. That is, attention should be given to the many and varied interrelated facets of teaching and learning, such as teacher behavior, content of lesson, student response, socio- and emotional-climate, physical setting, etc. Under Supervision by Performance Objectives, however, the focus should be on a selected facet of teaching specified by a performance objective. That is, attention should be given to such facets as questioning, direction-giving, reinforcing, and following through.

Under Supervision by Pattern Analysis, assumption number five indicates that the supervisor need not have a knowledge of specific teaching performance goals, whereas under Supervision by Performance Objectives, there is a need for such knowledge, expressed in behavioral terms. While under Supervision by Pattern Analysis it may be helpful to a supervisor to know generally what the teacher intends to do in the lesson, it is not necessary to know the specifics since the appropriate task associated with this approach is to record and interpret events as they occur within the lesson. Under Supervision by Performance Objectives, however, it is necessary for the supervisor to know specifically what the teacher intends to do in the lesson since the appropriate task associated with this approach is to collect data relevant to a performance goal.

Assumption six under Supervision by Pattern Analysis is that effective teaching should be situationally established, while assumption six under Supervision by Performance Objectives is that effective teaching should be generally established. Those who believe that effective teaching should be situationally established see the great variability among human values, motives and behavior. Thus, for them, effective teaching is not everywhere the same, but must be situationally established. Those who believe that effective teaching should be generally established see the many ways in which human values, motives and behavior are similar. Thus, for them, effective teaching can and should be considered the same for all instructional situations.

As was mentioned earlier, these two sets of assumptions give rise to two bi-polar approaches to clinical supervision: Supervision by Pattern Analysis and Supervision by Performance Objectives. Both approaches can be appropriately considered clinical supervision.

Which of these two supervisiory approaches should a supervisor use? I believe that it depends on the nature of the situation. For example, if the supervisor is making an initial visit, perhaps Supervision by Pattern Analysis may be the most appropriate. Likewise, when a teacher to be observed can not specify performance goals, Supervision by Pattern Analysis may be more in order. If a teacher feels threatened by the supervisor or if a close, trusting relationship has not been established, perhaps Supervision by Performance Objectives may be more well received and useful. The capacity of the supervisor to use either of these approaches is certainly another factor to consider. While there may be other factors affecting the choice between these supervisory approaches, the point is that I believe that neither of them is right for all situations.

There are also ways in which these two approaches can be combined. One example involves a supervisor beginning with Supervision by Pattern Analysis, which may lead to the establishment of performance goals for the next lesson. During the next lesson, Supervision by Performance Objectives would be in order. As this approach is employed, the supervisor may center the supervision on a performance goal, but collect detailed, specific data about teaching behavior relative to the established goal. After determining the degree to which the goal was achieved the supervisor and teacher could also look for teaching patterns within the collected data.

Ohter combinations could also be made as one operates around some combination of the six bi-polar sssumptions related to each approach.

Further research and development efforts are needed to guide supervisors in their use of Supervision by Pattern Analysis and Supervision by Performance Objectives. First, there is a need to identify the knowledge, dispositions, skills, and support procedures associated with each step of these approaches. Second, there is a need to field test each approach for the purpose of establishing sub-strategies and techniques for carrying them out. Third, there is a need to study further the contexts in which each approach, or a combination of them, is applicable. Fourth, there is a need for systematic studies of the impact of these approaches on teacher change and growth.

Summary

In this presentation I have asserted that clinical supervision should be considered to have the following defining characteristics: (1) has as its goal the improvement of student learning via the improvement of classroom teaching performance, (2) maintains a focus on in-class instructional events, (3) is carried on by a supervisor and teacher(s) in face-to-face relationships, (4) includes a sequence of pre-observation conference followed by an observation of teaching and then by a post-observation conference, and (5) is cyclical in nature over a period of time. Clinical supervision defined in this manner can be carried out within a variety of supervisor-teacher relationships.

Two approaches to clinical supervision were identified: Supervision by Pattern Analysis and Supervision by Performance Objectives. Underlying assumptions for each approach were offered and examples of various contexts in which each of these approaches might be useful were given. Lastly, suggestions for further research and development relating to these approaches were mentioned.

I believe that further research and development focusing upon clinical supervision and its two alternative approaches - Supervision by Pattern Analysis and Supervision by Performance Objectives - will release a latent force for the improvement of instruction and will foster the full birth of clinical supervision to the world of public education.

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